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7590 01/04/2007

Unisys Corporation
 Attn: Michael B. Atlass
 Unisys Way, MS/E8-114
 Blue Bell, PA 19424-0001
 03/06/2007 ADDRESS 2 00000023 193790 10617924

01 FC:1501 1400.00 DA
 02 FC:1504 300.00 DA
 03 FC:8001 3.00 DA

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/617,924	07/11/2003	Frederick George Fellenser	TN264	4226

TITLE OF INVENTION: MAINTENANCE INTERFACE UNIT FOR SERVICING MULTIPROCESSOR SYSTEMS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	30	\$1700	04/04/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
TRUONG, LOAN	2114	714-043000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363)
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Mark T. Starr
 2. Werner Axenfeld
 3. _____

3. ASSIGNMENT NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
 PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Unisys Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Unisys Way, Mail Stop E8-114
 Blue Bell, PA 19424-0001Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:
 Issue Fee
 Publication Fee (No small entity discount permitted)
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-3790 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)
 a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Mark T. StarrDate 3/5/07Typed or printed name Mark T. StarrRegistration No. 28,762

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